

DEPARTMENT OF HEALTH SERVICES  
COUNTY OF LOS ANGELES

SUBJECT: **TRAUMA HOSPITAL REGIONAL QUALITY  
IMPROVEMENT PROGRAM**

REFERENCE NO. 616

PURPOSE: To provide the trauma hospitals with a means of evaluation to ensure compliance with optimum trauma care standards through a regionalized approach.

AUTHORITY: Health & Safety Code, Division 2.5  
California Code of Regulations, Title 22, Chapter 7, Section 100256  
California Evidence Code, Section 1157.7  
California Civil Code, Part 2.6, Section 56.

PRINCIPLES:

- A. The proceedings of the Trauma Hospital Regional Quality Improvement Committees (R-QIC) shall be free from disclosure and discovery (Section 1157.7, California Evidence Code).

POLICY:

I. EMS Agency Responsibilities:

- A. Develop policies addressing quality improvement and system evaluation.
- B. Be responsible for annual and periodic performance evaluation of the trauma system.
- C. Provide system-wide data reports and analysis of trauma issues to committees as requested.

II. Trauma Hospitals Responsibilities:

- A. Implement and maintain a QI program approved by the EMS Agency that reflects the organization's current QI process.
- B. Recommend measurable and well-defined standards of care for trauma patients to the Trauma Hospital Advisory Committee (THAC) QI Committee. Monitor compliance with or adherence to these standards.
- C. Conduct multidisciplinary trauma peer review meetings.
- D. Participate in the trauma system-wide data registry.
- E. Participate in the Trauma Hospital Regional Quality Improvement Program and monitor selected system audit filters on a quarterly basis.

EFFECTIVE: 7-1-89

PAGE 1 OF 3

REVISED: 08-01-13

SUPERSEDES: 08-01-10

APPROVED:

  
Director, EMS Agency

  
Medical Director, EMS Agency

III. Quality Improvement Regions:

A. Individual trauma hospitals are assigned to one of following regions R-QICs:

1. Region I – CENTRAL

California Hospital Medical Center  
Children's Hospital Los Angeles  
Cedars-Sinai Medical Center  
Ronald Reagan-UCLA Medical Center  
LAC+USC Medical Center

2. Region II – SOUTH BAY

Harbor/UCLA Medical Center  
Long Beach Memorial Medical Center  
St. Mary Medical Center  
St. Francis Medical Center

3. Region III – VALLEY

Antelope Valley Hospital  
Henry Mayo Newhall Memorial Hospital  
Providence Holy Cross Medical Center  
Huntington Memorial Hospital  
Northridge Hospital Medical Center

B. Regional Quality Improvement Committees shall be responsible for:

1. Reviewing system-wide indicators approved by THAC.
2. Reviewing issues affecting the internal quality improvement activities of each member trauma hospital.
3. Identifying regional issues for trending and/or improvement.
4. Reporting summary of regional meetings to THAC-QI by a designated representative.

C. Regional Quality Improvement Committee membership shall include, at a minimum:

1. Trauma Director or designated trauma surgeon of each trauma hospital.
2. Trauma Program Manager of each trauma hospital.
3. EMS Agency Trauma System Program Manager.
4. Other individuals whose presence is germane to the quality assurance/improvement process may be invited on an as needed basis.

D. Regional Quality Improvement Committee Procedures:

1. The R-QICs shall meet quarterly with additional meetings called as determined by the committee members.
2. Meeting locations shall be determined by members.
3. Meeting notification to all members shall be the responsibility of the host trauma hospital.
4. Each trauma hospital shall bring to the meeting a written report (using the THAC-QI approved audit filter form) and provide a verbal report on the system-wide indicators approved by THAC, and any internal quality assurance/improvement activities.
5. An official attendance roster form which refers to the Evidence Code 1157.7 section regarding confidentiality, meeting minutes, including tallies of all actions taken on each indicator, and describing any regional issues(s) to be brought to the THAC-QI Committee, and audit filter forms for each meeting shall be maintained by the EMS Agency.
6. Elect a physician and nurse to represent the region at the Trauma QI Subcommittee. The term of office will be one year minimum.

CROSS REFERENCES:

Prehospital Care Manual:

Ref. No. 614, **Trauma System Quality Improvement Committee – Ad Hoc**

Ref. No. 615, **Trauma Quality Improvement Subcommittee – Trauma Hospital Advisory Committee (THAC-QI)**